

UNITED STATES DISTRICT COURT

District of _____

APPLICATION TO PROCEED WITHOUT PREPAYMENT OF FEES AND AFFIDAVIT

CASE NUMBER: 2:05CV759-T

RECEIVED
U.S. DISTRICT COURT
MIDDLE DISTRICT OF ALA.
2005 AUG -9
PLAINTIFF
X
DEFENDANT

I, CHRISTOPHER LUCAL declare that I am the (check appropriate box)

☒ petitioner/plaintiff/movant ☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No," go to Part 2)

If "Yes," state the place of your incarceration COVINGTON COUNTY JAIL

Are you employed at the institution? NO Do you receive any payment from the institution? NO

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

Work For Myself

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|------------------------------|--|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

4. Do you have any cash or checking or savings accounts? ☐ Yes ☒ No

If "Yes," state the total amount. _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? ☐ Yes ☒ No

If "Yes," describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

Melissa Luca - Wife - ALL
Christopher Warren Luca Jr/SON - ALL
Nicholas E. Luca/SON - ALL

I declare under penalty of perjury that the above information is true and correct.

8-8-05

Date

Christopher Luca

Signature of Applicant

NOTICE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

CERTIFICATE

I HEREBY CERTIFY THAT THE PLAINTIFF CHRISTOPHER LUCAL, HEREIN HAS THE SUM OF \$ - 0 - ON ACCOUNT TO HIS CREDIT AT THE COVINGTON COUNTY JAIL WHERE HE IS CONFINED, I FURTHER CERTIFY THAT A SHOWING AT LEAST THE PAST SIX MONTHS' TRANSACTIONS.

THE MONTH OF MAR - 0 - ON ACCOUNT
 THE MONTH OF APR - 0 - ON ACCOUNT
 THE MONTH OF MAY - 0 - ON ACCOUNT
 THE MONTH OF JUN - 0 - ON ACCOUNT
 THE MONTH OF JUL \$35.10 ON ACCOUNT
 THE MONTH OF AUG - 0 - 0 ON ACCOUNT

8-8-05
 DATE

Lt Darrell Nelson
 AUTHORIZED OFFICER OF
 INSTITUTION

2:05cv759

***** RESIDENT COPY *****

Add Money
Receipt # A41502Covington County Jail
07/18/2005 18:01:10
ST 001 / CD 1 / OPR CLIFF

LUCAL,

CHRISTOPHER W

SSN : 291761617
Date of Birth : 02/03/1970
Location : HOLD

Add Amount : \$20.00

Visitor Name :
Cash

Comment :

Debt Balance : \$0.00
Commissary Balance : \$21.02

***** RESIDENT COPY *****

Add Money
Receipt # A41797Covington County Jail
07/24/2005 12:29:18
ST 001 / CD 1 / OPR CJ002

LUCAL,

CHRISTOPHER W

SSN : 291761617
Date of Birth : 02/03/1970
Location : HOLD

Add Amount : \$15.00

Visitor Name : MELISSA LUCAL
Cash

Comment :

Debt Balance : \$0.00
Commissary Balance : \$15.10

***** RESIDENT COPY *****

Add Money
Receipt # A41879Covington County Jail
07/25/2005 21:13:07
ST 001 / CD 1 / OPR BLF

A

LUCAL,

CHRISTOPHER W

SSN : 291761617
Date of Birth : 02/03/1970
Location : HOLD

Add Amount : \$20.00

Visitor Name : MOTHER
Cash

Comment :

Debt Balance : \$0.00
Commissary Balance : \$35.10